

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

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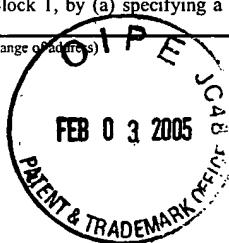
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22918 7590 12/08/2004

PERKINS COIE LLP  
 P.O. BOX 2168  
 MENLO PARK, CA 94026

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

LYNN B. ANDERSON	(Depositor's name)
<i>Lynne Anderson</i>	(Signature)
February 3, 2005	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/684,061	10/06/2000	Stephen H. Bartelmez	0450-0031.30	2847

## TITLE OF INVENTION: ANTISENSE COMPOSITIONS AND CANCER-TREATMENT METHODS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$685 #700	\$0	\$685 #700	03/08/2005
EXAMINER		ART UNIT	CLASS-SUBCLASS		
ZARA, JANE J		1635	435-375000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  
 Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
 "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list  
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Linda R. Judge  
 2 Jacqueline F. Mahoney  
 3 LeeAnn Gorthey

## 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

## (A) NAME OF ASSIGNEE

*AVI BioPharma, Inc.*

## (B) RESIDENCE: (CITY and STATE OR COUNTRY)

*Corvallis, Oregon, US*

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

## 4a. The following fee(s) are enclosed:

Issue Fee  
 Publication Fee (No small entity discount permitted)  
 Advance Order - # of Copies 13

## 4b. Payment of Fee(s):

A check in the amount of the fee(s) is enclosed.  
 Payment by credit card. Form PTO-2038 is attached.  
 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-2207 (enclose an extra copy of this form).

## 5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

*LeeAnn Gorthey*

Date

*Feb 3, 2005*

Typed or printed name

*LeeAnn Gorthey*

Registration No.

*37,337*

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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PATENT

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF: Bartelmez and Iversen  
APPLICATION No.: 09/684,061  
FILED: October 6, 2000  
FOR: **ANTISENSE COMPOSITIONS AND CANCER-TREATMENT METHODS**

EXAMINER: ZARA, JANE J.  
ART UNIT: 1635  
CONF. No.: 2847

**Transmittal of Issue Fee and Advance Order**

Mail Stop Issue Fee  
Commissioner for Patents  
P. O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In response to the Notice of Allowance dated December 8, 2004, applicant herewith submits the following:

- Form PTOL-85B
- Please charge Deposit Account No. 50-2207 for the following fees due:
  - 1) Issue Fee (37 CFR 1.18(a)):  Small Entity: \$700.00
  - 2) Fee for 13 advance copies of the printed patent (37 CFR 1.19(a)(1)(i)) - \$39.00

Respectfully submitted,  
PERKINS COIE LLP

A handwritten signature in cursive ink that appears to read "LeeAnn Gortey".

LeeAnn Gortey  
Registration No. 37,337

Date: Feb. 3, 2005

**Correspondence Address:**

Customer No. 22918  
Phone: 650 838-4403